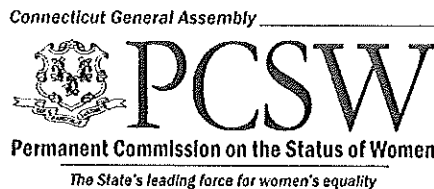


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**Testimony of
Teresa C. Younger
Executive Director
The Permanent Commission on the Status of Women
Before the
Human Services, Insurance and Real Estate, Public Health Committees
Monday, March 2, 2009**

Re:

H.B. 6582, AA Establishing the Connecticut Healthcare Partnership
H.B. 5172, AA Establishing the Connecticut Healthy Steps Program
S.B. 988, AAC Medicaid Funding for SAGA and Charter Oak
H.B. 6600, AAC the Establishment of the Susinet Plan

Senators Doyle, Crisco and Harris and Representatives Walker, Fontana and Ritter and members of the committee, thank you for this opportunity to provide testimony in support of on several healthcare reform bills before you today. I am also testifying on behalf of the Connecticut Women's Health Campaign (CWHC), a broad coalition of organizations committed to and working for the health and well-being of Connecticut women over their lifespan; and the Young Women's Leadership Program (YWLP), which highlights the concerns of women ages 18 to 35.

While the specifics of each bill – House bills 5172, 6582 and 6600, and Senate bill 988 – are all different, they all attempt to expand availability and affordability of health insurance benefits to all Connecticut residents. We support this intent because the increasing numbers of uninsured persons affect all genders, races, and ages.

In 2006, 11% of Connecticut's population aged 25 to 64,¹ and one-third of young adults, ages 19 to 29 were uninsured.² As of December 2007, the Kaiser Family Foundation estimated that there

¹ Families USA. *Dying for Coverage*, April 2008.

² <http://www.ct.gov/ohca/lib/ohca/common_elements/household06_summary_single_pages_for_pdf.pdf>.

means that medical interpreters must be provided and paid for as a covered service in order to ensure that those with limited English proficiency are able to communicate effectively with their providers.

Protect the confidentiality of women and girls. Current state statutes protecting the confidentiality of services for all minors, including reproductive and behavioral health care, must be integral to any universal plan. For example, patients with HIV infection, survivors of sexual violence and domestic abuse, and those who seek behavioral health care must be confident that seeking care will not result in disclosure of their health condition.

Health care and insurance must be affordable so that true universality is accomplished. This means that low-income households should be exempt from cost-sharing while higher income households should pay no more than 5% of family income on total health care costs.

We urge you to include these elements in any plan for health care reform. Thank you for your consideration.



CONNECTICUT WOMEN'S HEALTH CAMPAIGN E-News

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